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Bib Data Sheet

CONFIRMATION NO. 8116

SERIAL NUMBER 10/830,159	FILING DATE 04/22/2004 RULE	CLASS 002	GROUP ART UNIT 3765	ATTORNEY DOCKET NO. F-8230
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APPLICANTS

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** CONTINUING DATA ***** *none R2*

** FOREIGN APPLICATIONS ***** *OK R2*

REPUBLIC OF KOREA 2003-13313 04/29/2003

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 06/28/2004

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY KOREA, REPUBLIC OF	SHEETS DRAWING 5	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

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TITLE
 Cushion pad structure for headband

FILING FEE RECEIVED 1072	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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<input type="checkbox"/> Other
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